



STATEMENT OF SHARED LIVING ARRANGEMENT

COMMUNITY SERVICES OFFICE (CSO)	TELEPHONE NUMBER
ACES CLIENT IDENTIFICATION NUMBER	DATE

The Statement of Shared Living Arrangement explains how you and the other people living at your address share the costs for food, rent, and utilities. Attach additional pages if needed.

1. CLIENT'S NAME	2. TELEPHONE NUMBER () -	3. TOTAL NUMBER OF PERSONS LIVING AT THIS ADDRESS
4. STREET ADDRESS	CITY	STATE ZIP CODE

5. Complete the following information for all other ADULTS (age 18 and over) who live at your address:

NAME	SOCIAL SECURITY NUMBER	BIRTHDATE	RELATIONSHIP TO ME (SON, MOTHER, FRIEND, ETC.)	SHARES FOOD COST		COOKS OR EATS MEALS WITH ME	
				YES	NO	YES	NO
a.							
b.							
c.							
d.							

6. Complete the following information for all CHILDREN (under 18) who live at your address:

NAME	SOCIAL SECURITY NUMBER	BIRTHDATE	RELATED TO ME?			RELATED TO ANOTHER ADULT LIVING AT THIS ADDRESS?			
			YES	NO	HOW?	YES	NO	IF YES, WHO?	HOW?
a.									
b.									
c.									
d.									
e.									
f.									

7. Expense information

Current monthly rent for your address	Do you have heating or cooling costs not included in the rent? <input type="checkbox"/> Yes <input type="checkbox"/> No
DO NOT INCLUDE ANY AMOUNT FOR DEPOSITS, BACK	• Heating costs: Costs to operate a device used to heat living quarters.
	• Cooling costs: Costs to operate an air conditioning system or room air conditioner.
	• Do not include costs for cooking stoves or ovens; gathering fuel for heating; or fans for cooling.
\$	Do you have other electrical, water, or garbage costs not included in the rent? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Do you have telephone costs not included in the rent? <input type="checkbox"/> Yes <input type="checkbox"/> No

8. Complete the following to explain how you and the other adults living at your address divide monthly expenses.

On the first line, put the amount you pay for each expense. On the other lines, put the name of the other person and amount they pay for each expense:

NAME	EXPENSES				
	RENT	HEATING/COOLING	ELECTRICITY, WATER, GARBAGE	TELEPHONE	OTHER
I Pay	\$	\$	\$	\$	\$
a.	\$	\$	\$	\$	\$
b.	\$	\$	\$	\$	\$
c.	\$	\$	\$	\$	\$
d.	\$	\$	\$	\$	\$

All persons 18 and over must sign and date this form below.

I declare, under penalty of perjury, that these statements represent our current shared living arrangements.

CLIENT'S SIGNATURE	DATE	SIGNATURE	DATE
CLIENT'S SIGNATURE	DATE	SIGNATURE	DATE